PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/518,013			ing Date 14/2 <b>00</b> 4	To be Mailed
	Al	PPLICATION A	AS FILE	OTHER THAN SMALL ENTITY OR SMALL ENTITY							
⊢	FOR		NUMBER FILED		(Column 2) NUMBER EXTRA		RATE (\$)	FEE (\$)	T .	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	$\neg$	N/A	LD NO	N/A	ı	N/A	122 (0)	i	N/A	TLL (0)
	SEARCH FEE		N/A	_	N/A	ı	N/A		1	N/A	
	(37 CFR 1.16(k), (i), EXAMINATION FE	E	N/A	-	N/A		N/A		ł	N/A	
	(37 CFR 1.16(o), (p), FAL CLAIMS CFR 1.16(i))	or (q))	minus 20 =				x \$ =		OR	x s =	
IND	EPENDENT CLAIM CFR 1,16(h))	is	minus 3 = *				x \$ =		1	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pape 50 (\$125 ional 50 s	gs exceed 100 on size fee due for each on thereof. See CFR 1.16(s).							
	MULTIPLE DEPEN	7 CFR 1.16(j))				1					
* If	the difference in col	r "0" in column 2.		TOTAL		]	TOTAL				
APPLICATION AS AMENDED – PART II         OTHER THAN           (Column 1)         (Column 2)         (Column 3)         SMALL ENTITY         OR         SMALL ENTITY											
AMENDMENT	06/19/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18())	* 100	Minus	<b>~</b> 37	= 63		x \$ =		OR	X \$52=	3276
z	Independent (37 CFR 1.16(h))	• 10	Minus	···10	= 0		x \$ =		OR	X \$220=	0
¥	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	3276
(Column 1) (Column 2) (Column 3)											
AMENDMENT	01/22/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))	· 27	Minus	·· 100	= 0	l	x \$ =		OR	X \$52 =	0
M	Independent (37 CFR 1,16(h))	* 8	Minus	··· 10	= 0	1	x \$ =		OR	X \$220 =	0
ä	Application Size Fee (37 CFR 1.16(s))								]		
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
									OR	TOTAL ADD'L FEE	0
" If the entry in column 1 is less than the entry in column 2, write "o" in column 3.  " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.											

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